



MARICOPA COUNTY
COMMITTEE
STATEMENT OF ORGANIZATION

MARICOPA COUNTY

MAR 22 2022

ELECTIONS DEPT.

COMMITTEE ID#
1002233



Initial Registration



Amended Registration

TYPE OF POLITICAL COMMITTEE (choose one):

DATE: **3/22/2022**



Candidate



Political Party

(attach proof of qualification pursuant to ARS 16-802, 16-804 or 16-823)



Political Action Committee (PAC)



County Party



Leg Dist Party

COMMITTEE NAME (required) *If sponsored, must include sponsor's name*

Foster for Maricopa

RESIDENCE ADDRESS (Number and Street)

2211 E. Highland Ave. #210

CITY

Phoenix

STATE

AZ

ZIP

85016

MAILING ADDRESS (If Different from Residence Address)

CITY

STATE

ZIP

COMMITTEE PHONE # (required)

(602) 451-4292

COMMITTEE EMAIL ADDRESS (required)

anni@annifoster.com

COMMITTEE WEBSITE (if any)

www.annifoster.com

ELECTION CYCLE (year the election will

take place)

2022

CANDIDATE INFORMATION

CANDIDATE NAME:

Anni L. Foster

PARTY AFFILIATION:

Republican

OFFICE SOUGHT: (Including District)

Maricopa County Attorney

RESIDENCE ADDRESS (Number and Street)

4650 N Central #253

CITY

Phoenix

STATE

AZ

ZIP

85012

POLITICAL ACTION COMMITTEE INFORMATION

POLITICAL FUNCTION (select any that apply)

☐ Contributions

☐ Recall Expenditures

☐ Candidate Related Independent Expenditures

☐ Ballot Measure Expenditures

SPECIAL STATUS (if applicable)

☐ Separate Segregated Fund of a Corporation, LLC, Partnership, or Union

☐ Standing Committee (provide copy of AZSOS registration)

☐ Mega PAC (provide copy of AZSOS registration)

SPONSORSHIP INFORMATION (if applicable)

NAME OR NICKNAME

PHONE NUMBER

MAILING ADDRESS

EMAIL ADDRESS

WEBSITE (if any)

BANK ACCOUNT INFORMATION (BANK NAME)			
1. Alliance Bank	2.	3.	
COMMITTEE OFFICER INFORMATION:			
CHAIRPERSON (First Name) Steve	(Last Name) Twist		
RESIDENCE ADDRESS (Number and Street) 13870 N 98th Pl	CITY Scottsdale	STATE AZ	ZIP 85260
MAILING ADDRESS (If Different from Residence Address)	CITY	STATE	ZIP
CHAIRMAN PHONE # (602) 418-8782	CHAIRMAN EMAIL ADDRESS Steve_Twist@sgagroup.com		
CHAIRMAN OCCUPATION Vice President and General Counsel	CHAIRMAN EMPLOYER Services Group of America		
TREASURER (First Name) Ashley	(Last Name) Ragan		
RESIDENCE ADDRESS (Number and Street) 307 E Royal Palm Rd	CITY Phoenix	STATE AZ	ZIP 85020
MAILING ADDRESS (If Different from Residence Address)	CITY	STATE	ZIP
TREASURER TELEPHONE # (602) 451-4292	TREASURER EMAIL ADDRESS ashley@incomplianceaz.com		
TREASURER OCCUPATION <i>consultant</i>	TREASURER EMPLOYER <i>self employed</i>		
DECLARATION AND SIGNATURES:			
<p>I declare under penalty of perjury that the foregoing information is true and correct. I further declare that I: (1) consent to serve as chairperson or treasurer of the committee named herein, if applicable; (2) designate the above-named committee as my official candidate committee and authorize it to receive/make contributions/expenditures on my behalf, if applicable; (3) have read the Secretary of State's campaign finance and reporting guide; (4) agree to comply with Arizona election law, including campaign finance laws codified at A.R.S. §§ 16-901 to 16-938; and (5) agree to accept all notifications and legal service of process for campaign finance purposes via the email address(es) provided herein.</p>			
DATE: <i>3.22.22</i>	CHAIRMAN'S SIGNATURE: <i>[Signature]</i>		
DATE: <i>3.22.22</i>	TREASURER'S SIGNATURE: <i>[Signature]</i>		
DATE: <i>3-22-22</i>	CANDIDATE'S SIGNATURE (if applicable): <i>[Signature]</i>		

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